

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
C71109082

FILING DATE

7-2-98

CLAIMS

10-19-04	CLAIMS					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DER.	IND.	DER.	IND.	DER.	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10		7				
11	1					
12		7				
13						
14						
15						
16	1					
17		8				
18	1					
19		1				
20	1					
21		2				
22		7				
23						
24		8				
25		8				
26		8				
27		8				
28		8				
29		8				
30		2				
31		2				
32		2				
33	1					
34		1				
35						
36						
37						
38						
39						
40			1			
41		1		1		
42		1		1		
43		1		1		
44		1		1		
45		1		1		
46		1		1		
47		1		1		
48		1		1		
49		1		1		
50	1		1	1		
TOTAL IND.	21		7	7		
TOTAL DER.	106		17	17		
TOTAL CLAIMS	127		24	24		

*	IND.	DER.	*	IND.	DER.	*
51		1		1		
52		1		1		
53						
54						
55						
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95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DER.						
TOTAL CLAIMS	2					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS